California Code of Regulations Title 17, Division 2 Chapter 3: Community Services

SubChapter 2: Vendorization

Article 2: Vendorization Process

Section 54302 - Definitions

- (a) The following definitions shall apply to the language contained in Sections 54310 through 54390 of these regulations:
- (1) "Activity Center" means a community-based day program that serves adults who generally have acquired most basic self-care skills, have some ability to interact with others, are able to make their needs known, and respond to instructions. Activity center programs focus on the development and maintenance of the functional skills required for self-advocacy, community integration and employment;
- (2) "Adult" means a person 18 years of age or older;
- (3) "Adult Day Health Care Program" means an Adult Day Care Health Care Program as defined in Health and Safety Code Section 1570.7(a);
- (4) "Adult Day Programs" means those community-based day programs defined in (a)(1), above and (a)(6), (11), (13), (31), and (60) below;
- (5) "Adult Day Services" means the broad category of nonresidential services under which adult day programs are categorized;
- (6) "Adult Development Center" means a community-based day program that serves adults who are in the process of acquiring self-help skills. Individuals who attend adult development centers generally need sustained support and direction in developing the ability to interact with others, to make their needs known, and to respond to instructions. Adult development center programs focus on the development and maintenance of the functional skills required for self?advocacy, community integration, employment, and self-care;
- (7) "Age Appropriate" means the consideration of the chronological age of the person in the use of activities, instructional locations, and techniques;
- (8) "Applicant" means an individual or entity that desires to be a vendor;
- (9) "Authorized Agency Representative" means a person authorized to act on behalf of either the Department or the regional center, by law, by court order, or by a written statement signed by the Director of the Department or the regional center director, respectively;
- (10) "Authorized Consumer Representative" means the parent or guardian of a minor, conservator of an adult, or person who is legally entitled to act on behalf of the consumer;
- (11) "Behavior Management Program" means a community-based day program that serves adults with severe behavior disorders and/or dual diagnosis who, because of their behavior problems, are not eligible

for or acceptable in any other community-based day program;

- (12) "Child" means a person under the age of 18 years;
- (13) "Community-based Day Programs" means those programs which provide services to individuals on an hourly or daily basis, but less than a 24-hour basis in the community rather than at a developmental center. Only the following types of services are community-based day programs: activity centers, adult development centers, behavior management programs, independent living programs, infant development programs and social recreation programs;
- (14) "Community Integration" means presence, participation and interaction in natural environments;
- (15) "Congregate Living Health Facility" means a Congregate Living Health Facility as defined in Health and Safety Code Section 1250(i)(1);
- (16) "Consumer" means an individual who has been determined by a regional center to meet the eligibility criteria of the Welfare and Institutions Code, Section 4512, and of Title 17, Sections 54000, 54001 and 54010, and for whom the regional center has accepted responsibility;
- (17) "Controlling Agency" means any agency, department, or commission that by statute requires standards to be met for the issuance of a license, credential, registration, certificate or permit required for the operation or provision of service;
- (18) "Days" means calendar days unless otherwise stated;
- (19) "Department" means the Department of Developmental Services;
- (20) "Developmental Center" means any institution referred to in the Welfare and Institutions Code, Section 4440. Developmental Center is synonymous with state hospital;
- (21) "DHS" means the Department of Health Services;
- (22) "DSS" means the Department of Social Services;
- (23) "Direct Care Staff" means staff who personally provide direct services to consumers. Personnel who are responsible for other staff functions may be considered direct care staff only during that time when they are providing direct services to consumers or are involved in program preparation functions:
- (24) "Direct Services" means hands-on training provided by the vendor in accordance with the requirements of the consumer's Individual Program Plan and the provisions of Section 56720 of these regulations;
- (25) "Director" means the Director of the Department of Developmental Services;
- (26) "Family Member" means an individual who: A) Has a developmentally disabled person residing with him or her; B) Is responsible for the 24-hour care and supervision of the developmentally disabled person; and C) Is not a licensed or certified resident care facility or foster family home receiving funds from any public agency or regional center for the care and supervision provided;
- (27) "Functional Skills" means those skills which enable an individual to communicate, interact with others and to perform tasks which have practical utility and meaning at home, in the community or on the job;

- (28) "Generic Agency" means any agency which has a legal responsibility to serve all members of the general public and which is receiving public funds for providing such services;
- (29) "Generic Support(s)" means voluntary service organizations, commercial businesses, non-profit organizations, generic agencies, and similar entities in the community whose services and products are regularly available to those members of the general public needing them;
- (30) "Group Practice" means more than one individual which functions as a business entity while providing services to individuals:
- (31) "Independent Living Program" means a community-based day program that provides to adult consumers the functional skills training necessary to secure a self?sustaining, independent living situation in the community and/or may provide the support necessary to maintain those skills. Independent living programs focus on functional skills training for adult consumers who generally have acquired basic self-help skills and who, because of their physical disabilities, do not possess basic self-help skills, but who employ and supervise aides to assist them in meeting their personal needs;
- (32) "Individual Program Plan (IPP)" means a written plan that is developed by a regional center Interdisciplinary (ID) Team, in accordance with the provisions of the Welfare and Institutions Code, Sections 4646 and 4646.5:
- (33) "Infant Development Program" means a community-based day program defined in the Welfare and Institutions Code, Section 4693;
- (34) "In-home Respite Services" means intermittent or regularly scheduled temporary non-medical care and supervision provided in the consumer's own home and designed to do all of the following:
- (A) Assist family members in maintaining the consumer at home;
- (B) Provide appropriate care and supervision to protect the consumer's safety in the absence of family members;
- (C) Relieve family members from the constantly demanding responsibility of caring for a consumer; and
- (D) Attend to the consumer's basic self-help needs and other activities of daily living, including interaction, socialization, and continuation of usual daily routines which would ordinarily be performed by the family member:
- (35) "Interdisciplinary (ID) Team" means the group of persons convened in accordance with the Welfare and Institutions Code, Section 4646, for the purpose of preparing a consumer's IPP;
- (36) "Intermediate Care Facility" means an Intermediate Care Facility as defined in Health and Safety Code Section 1250(d);
- (37) "Intermediate Care Facility/Developmentally Disabled (ICF/DD)" means a licensed residential health facility which provides care and support services to developmentally disabled consumers whose primary need is for developmental services and who have a recurring, but intermittent, need for skilled nursing services:
- (38) "Intermediate Care Facility/Developmentally Disabled-Habilitative (ICF/DD-H)" means a licensed

residential health facility which has as its primary purpose the furnishing of 24-hour personal care, developmental training, habilitative, and supportive health services in a facility with 15 beds or less to residents with developmental disabilities;

- (39) "Intermediate Care Facility/Developmentally Disabled-Nursing (ICF/DD?N)" means a licensed residential health facility which has as its primary purpose the furnishing of 24-hour nursing supervision, personal care, and training in habilitative services in a facility with 4-15 beds to medically fragile developmentally disabled consumers, or to consumers who demonstrate a significant developmental delay that may lead to a developmental disability if not treated. Such consumers must have been certified by a physician as not requiring skilled nursing care;
- (40) "Long-Term Health Care Facility" means an Adult Day Health Care Program, a Congregate Living Health Facility, a Skilled Nursing Facility (SNF), an Intermediate Care Facility (ICF), an Intermediate Care Facility/Developmentally Disabled (ICF/DD), an Intermediate Care Facility/Developmentally Disabled-Habilitative (ICF/DD-H), or an Intermediate Care Facility/Developmentally Disabled?Nursing(ICF/DD-N);
- (41) "Management Organization" means a separate and distinct corporation or entity which operates two or more services;
- (42) "Mobility Training" means individually planned activities and instruction which enable adults with developmental disabilities to utilize the most normalizing independent transportation modes possible;
- (43) "Natural Environment" means places and social contexts commonly used by individuals without developmental disabilities;
- (44) "Natural Supports" means, pursuant to Welfare and Institutions Code, Section 4512(e), personal associations and relationships typically developed in the family and community that enhance or maintain the quality and security of life for people;
- (45) "Nonresidential Services" means all services provided by any vendor other than a residential facility;
- (46) "Nursing Facility" means a licensed health facility or a distinct part of a hospital which provides continuous skilled nursing and supportive care to patients whose primary need is for availability of skilled nursing care on an extended basis. It provides 24-hour inpatient care and, as a minimum, includes physician, skilled nursing, dietary and pharmaceutical services, and an activity program;
- (47) "Program Preparation Functions" means secondary activities performed by non-residential direct care staff, such as preparation of lesson plans, completion of the necessary documentation required by these regulations, preparation and clean-up of the area where the direct service is provided to consumers, or involvement in other duties such as staff meetings and parent conferences;
- (48) "Purchase of Service Funds" means those funds identified in the Budget Act for the purpose of purchasing services, provided by vendors, for consumers;
- (49) "Reasonably suspected" means an objectively reasonable suspicion that a person would entertain, based upon facts that could cause a reasonable person in a like position, drawing, when appropriate, on his or her training and experience, to suspect abuse.
- (50) "Regional Center" means a diagnostic, counseling, and service coordination center for developmentally disabled persons and their families which is established and operated pursuant to the Welfare and

Institutions Code, Sections 4620 through 4669, by a private nonprofit community agency or corporation acting as a contracting agency. As used in these regulations, any reference to the regional center shall, by reference, be applicable to those agencies or persons with which the regional center contracts to provide service coordination to consumers under the provisions of the Welfare and Institutions Code, Section 4648;

- (51) "Residential Facility" means any licensed community care facility as defined in Health and Safety Code Section 1502(a)(1), (4), (5) or (6), or a licensed residential care facility for the elderly as defined in Health and Safety Code Section 1569.2;
- (52) "Self-Advocacy" means the awareness, motivation and ability of an individual to represent and communicate his or her own interests, to exercise personal choice, to exert control over his or her environment, and to avoid exploitation and abuse;
- (53) "Self-Care" means meeting one's physical and personal needs, such as dressing, grooming and hygiene without dependence on others or having the ability to direct others to meet those needs;
- (54) "Service Catchment Area" means the geographical area within which a regional center provides services specified in its contract with the Department as required by the Welfare and Institutions Code, Section 4640:
- (55) "Service Code" means a number which is assigned by the vendoring regional center to a vendor which indicates the type of authorized service to be provided;
- (56) "Service Contract" means an agreement entered into between a regional center and a non?residential vendor which specifies the level of payment and units of service to be used by the vendor to charge and invoice the regional center for services provided to consumers;
- (57) "Service Design" means a written description of the service delivery capabilities and orientation developed, maintained, and implemented by a SLS vendor.
- (58) "Services" means assistance provided, and duties performed, by a vendor for a consumer;
- (59) "Skilled Nursing Facility (SNF)" means a Skilled Nursing Facility as defined in Health and Safety Code Section 1250(c).
- (60) "Social Recreation Program" means a community-based day program which provides community integration and self-advocacy training as they relate to recreation and leisure pursuits;
- (61)"Special Incident Report" is the documentation prepared by vendor staff or long-term health care facility staff detailing a special incident and provided to the regional center.
- (62) "Staffing Ratio" or "Staff-to-Consumer Ratio" means the numerical relation of the number of direct care staff to the number of consumers.
- (63) "Statewide Vendor Panel" means the statewide listing of all vendors which contains information specified in Section 54334 of these regulations.
- (64) "Subcode" means a series of a maximum of five numbers and/or letters which is assigned by the vendoring regional center to a vendor for billing purposes;

- (65) "Supported Living Service(s) (SLS)" means those services and supports referenced in Section 54349(a) through (e), and specified as SLS service and support components in Title 17, Section 58614, which are provided by a SLS vendor, paid for by the regional center, and support consumers' efforts to:
- (A) Live in their own homes, as defined in Title 17, Section 58601(a)(3);
- (B) Participate in community activities to the extent appropriate to each consumer's interests and capacity; and
- (C) Realize their individualized potential to live lives that are integrated, productive, and normal;
- (66) "Unit of Service" means the increment of service provided to consumers which is used to charge and invoice the regional center for services provided. The increment of service is specified as hours, days, transportation mileage or any other increment of service agreed to by the Department, regional center and the vendor;
- (67) "User Regional Center or Utilizing Regional Center" means any regional center which utilizes a service within the vendoring regional center's catchment area;
- (68) "Vendor" means an applicant which has been given a vendor identification number and has completed the vendorization process, and includes those specified in Section 54310(d), and (e);
- (69) "Vendor Application" means the form, DS 1890 (12/92), which contains the information specified in Section 54310(a)(1) through (10) of these regulations;
- (70) "Vendor Identification Number" means the unique number which is assigned to each vendor in order to establish a recordkeeping and tracking system for regional centers' billing purposes;
- (71) "Vendoring Regional Center" means the regional center in whose service catchment area the vendor is located:
- (72) "Vendorization" means the process used to:
- (A) Verify that an applicant meets all of the requirements and standards pursuant to Section 54320(a) of these regulations prior to the provision of services to consumers; and
- (B) Assign vendor identification numbers, service codes and subcodes, for the purpose of identifying vendor expenditures;
- (73) "Voucher" means a written authorization issued by a regional center to a family member or consumer to procure the service for which the voucher was issued and which specifies the maximum reimbursement authorized by the regional center.

Authority: Sections 4405, 4648(a), and 4689.7(c), Welfare and Institutions Code; and Section 11152, Government Code.

Reference: Sections 1250 and 1502, Health and Safety Code; Sections 240, 242, 243.4, 245, 261, 264.1, 285, 273d, 285, 286, 288, 288a, 289, 311.2, 311.3, 311.4, 647a, 11165.1, 11165.2, 11165.3 and 11165.6, Penal Code; Sections 4504, 4512(i), 4646.5, 4648(a), 4689.7(c), 4691, 4693, 4791, 15610.57 and 15610.63; and Article II, Chapter 5, Welfare and Institutions Code.

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Section 54327 - Requirements for Special Incident Reporting by Vendors and Long-Term Health Care Facilities

- (a) Parent vendors, and consumers vendored to provide services to themselves, are exempt from the special incident reporting requirements set forth in this Article.
- (b) All vendors and long-term health care facilities shall report to the regional center:
- (1) The following special incidents if they occurred during the time the consumer was receiving services and supports from any vendor or long-term health care facility:
- (A) The consumer is missing and the vendor or long-term health care facility has filed a missing persons report with a law enforcement agency;
- (B) Reasonably suspected abuse/exploitation including:
- 1. Physical;
- 2. Sexual;
- 3. Fiduciary:
- 4. Emotional/mental; or
- Physical and/or chemical restraint.
- (C) Reasonably suspected neglect including failure to:
- 1. Provide medical care for physical and mental health needs;
- 2. Prevent malnutrition or dehydration;
- 3. Protect from health and safety hazards;
- 4. Assist in personal hygiene or the provision of food, clothing or shelter; or
- 5. Exercise the degree of care that a reasonable person would exercise in the position of having the care and custody of an elder or a dependent adult.
- (D) A serious injury/accident including:
- 1. Lacerations requiring sutures or staples;
- Puncture wounds requiring medical treatment beyond first aid;
- 3. Fractures:
- 4. Dislocations;
- 5. Bites that break the skin and require medical treatment beyond first aid;
- 6. Internal bleeding requiring medical treatment beyond first aid;
- 7. Any medication errors:
- 8. Medication reactions that require medical treatment beyond first aid; or
- 9. Burns that require medical treatment beyond first aid.

- (E) Any unplanned or unscheduled hospitalization due to the following conditions:
- 1. Respiratory illness, including but not limited, to asthma; tuberculosis; and chronic obstructive pulmonary disease:
- 2. Seizure-related;
- 3. Cardiac-related, including but not limited to, congestive heart failure; hypertension; and angina;
- 4. Internal infections, including but not limited to, ear, nose and throat; gastrointestinal; kidney; dental; pelvic; or urinary tract;
- 5. Diabetes, including diabetes-related complications
- 6. Wound/skin care, including but not limited to, cellulitis and decubutus; 7. Nutritional deficiencies, including but not limited to, anemia and dehydration; or
- 8. Involuntary psychiatric admission;
- (2) The following special incidents regardless of when or where they occurred:
- (A) The death of any consumer, regardless of cause;
- (B) The consumer is the victim of a crime including the following:
- 1. Robbery, including theft using a firearm, knife, or cutting instrument or other dangerous weapons or methods which force or threaten a victim;
- 2. Aggravated assault, including a physical attack on a victim using hands, fist, feet or a firearm, knife or cutting instrument or other dangerous weapon;
- 3. Larceny, including the unlawful taking, carrying, leading, or riding away of property, except for motor vehicles, from the possession or constructive possession of another person;
- 4. Burglary, including forcible entry; unlawful non-forcible entry; and attempted forcible entry of a structure to commit a felony or theft therein;
- 5. Rape, including rape and attempts to commit rape.
- (C) The report pursuant to subsection (b) shall be submitted to the regional center having case management responsibility for the consumer.
- (d) When the regional center with case management responsibility is not the vendoring regional center, the vendor or long-term health care facility shall submit the report pursuant to subsection (b) to both the regional center having case management responsibility and the vendoring regional center.
- (e) The vendor's or long-term health care facility's report to the regional center pursuant to subsection (b) shall include, but not be limited to:
- (1) The vendor or long-term health care facility's name, address and telephone number;
- (2) The date, time and location of the special incident:
- (3) The name(s) and date(s) of birth of the consumer(s) involved in the special incident;
- (4) A description of the special incident;
- (5) A description (e.g., age, height, weight, occupation, relationship to consumer) of the alleged perpetrator
- (s) of the special incident, if applicable;
- (6) The treatment provided to the consumer(s), if any;

- (7) The name(s) and address(es) of any witness(es) to the special incident;
- (8) The action(s) taken by the vendor, the consumer or any other agency(ies) or individual(s) in response to the special incident;
- (9) The law enforcement, licensing, protective services and/or other agencies or individuals notified of the special incident or involved in the special incident; and
- (10) The family member(s), if applicable, and/or the consumer's authorized representative, if applicable, who have been contacted and informed of the special incident.
- (f) The report pursuant to subsection (b) shall be submitted to the regional center by telephone, electronic mail or FAX immediately, but not more than 24 hours after learning of the occurrence of the special incident.
- (g) The vendor or long-term health care facility shall submit a written report of the special incident to the regional center within 48 hours after the occurrence of the special incident, unless a written report was otherwise provided pursuant to subsection (e). The report pursuant to this subsection may be made by FAX or electronic mail.
- (h) When a vendor makes a report of an event to the Department of Social Services' Community Care Licensing Division pursuant to Title 22, California Code of Regulations, Section 80061(b) the vendor shall simultaneously report the event to the regional center by telephone, FAX or electronic mail.
- (1) The vendor shall concurrently submit to the regional center a copy of any subsequent written report regarding the event that is submitted to the Department of Social Services' Community Care Licensing Division.
- (i) When a long-term health care facility reports an unusual occurrence to the Department of Health Services' Licensing and Certification Division pursuant to Title 22, California Code of Regulations, Sections 72541, 75339, 76551 or 76923, the long-term health care facility shall simultaneously report the unusual occurrence to the regional center immediately by telephone, FAX or electronic mail.
- (1) The long-term health care facility shall concurrently submit to the regional center a copy of any subsequent report, or any written confirmation of the unusual occurrence, that is submitted to the Department of Health Services' Licensing and Certification Division.
- (j) The vendor or long-term health care facility may submit to the regional center a copy of the report submitted to a licensing agency when the report to the licensing agency contains all the information specified in subsection (d)(1) through (10).
- (k) These regulations shall not remove or change any reporting obligations under the Elder and Dependent Adult Abuse Reporting Act commencing with Welfare and Institutions Code Section 15600 or the Child Abuse and Neglect Reporting Act commencing with Penal Code Section 11164.

Authority: Section 11152, Government Code.

Reference: Sections 4500, 4501, 4502, 4648, 4648.1 and 4742, Welfare and Institutions Code.

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